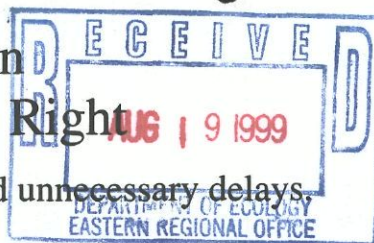




State of Washington
Application for a Water Right



For Ecology Use
Fee Paid \$102
Date 8/27/99
ck#3263

Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name (City of Grand Coulee) Home Tel: () -
Mailing Address P.O. Box 180 Work Tel: (509) 633 - 1150
City (Grand Coulee) State WA Zip+4 99133 +0180 FAX: (509) 633 - 1370

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name Mayor Robert Seiler Home Tel: () -
Mailing Address P.O. Box 180 Work Tel: (509) 633 - 1150
City Grand Coulee State WA Zip+4 99133 +0180 FAX: (509) 633 - 1370
Relationship to applicant Mayor

Section 3. STATEMENT OF INTENT

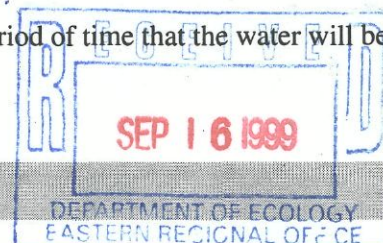
The applicant requests a permit to use not more than 500 (2000) (☒ gallons per minute or
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s)
of (continuous municipal water supply). ATTACH A "LEGAL"

DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not
sufficient.

Estimate a maximum annual quantity to be used in acre-foot per year: 80

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From ___/___/___ to ___/___/___



Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>(1 (5))</u> well(s).
Number of diversions: _____	<u>PER-TRACY JOHNSON- of WYATT Eng.</u>
Source flows into (name of body of water):	Size & depth of well(s): <u>10" - 230 ft. (265) ft Rds</u>

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner:

1,100 ft. east and 2,100 ft. south of NW corner of Sect. 11

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
<u>SW</u>	<u>(NW)</u>	<u>11</u>	<u>28N</u>	<u>30E</u>	<u>Grant</u>			

For Ecology Use Date Received: 8/19/99 Priority Date: 8/19/99
SEPA: Exempt/Not Exempt FERC License # N/A Dept. Of Health #
Date Accepted As Complete By Date Returned By WRIA: 42

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: City of Grand Coulee
- B. Briefly describe your proposed water system. (See instructions.) 265 ft
We propose to drill a new well (10" - 230 ft. deep) in the approximate location as the existing "Dexter" well, while abandoning the "Dexter" well. See attached "Application for Change of Water Right." This new productive well will provide additional water supply to the Municipal water system of Grand Coulee, WA.
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: N/A Type of connection N/A
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☒ YES ☐ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO
If yes, when was it approved? N/A Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO
If yes, when was it approved? N/A Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Completed for all irrigation and agriculture uses.)

- A. N/A
Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
Use _____ Acres _____
Use _____ Acres _____
Use _____ Acres _____
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no.: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal Type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☒ YES ☐ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Heading west on SR 174 into Grand Coulee: continue west through the intersection of SR 155, at the first controlled intersection in town: continue NW for approximately 250 ft., walk due west towards powerlines approximately 150 ft. to well location.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☒ YES ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

B. Does the applicant own the land on which the water source is located?

☐ YES ☒ NO

If no, submit a copy of agreement:

Owned by the Bureau of Reclamations


I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.


Applicant (or authorized representative)

(MR. TRACY JOHNSON - Wyatt Engineering)

Date

8/16/99


Landowner for place of use (if same as applicant, write "same")

MAYOR ROBERT SEILER

Date

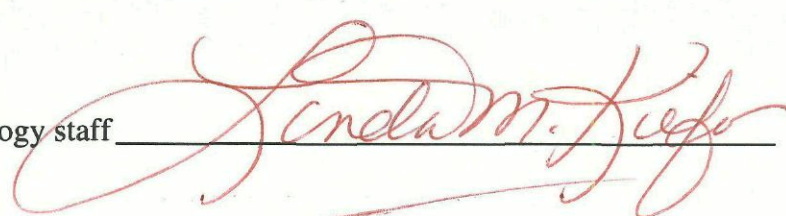
X 9-14-99

APPLICATION



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
<input type="checkbox"/> Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
<input checked="" type="checkbox"/> Section number(s) <u>11B</u> <input checked="" type="checkbox"/> is/are incomplete <u>needs your full signature + date</u>	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation: <u>Also - please mark your initials by each change on the application that was done in red ink</u>	
Please provide the additional information requested above and return your application by <u>Oct 8th</u> <u>1999</u> (date).	

Ecology staff  Date 9/8/99

OK
Rec'd back 9/15/99 L. Kief

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).